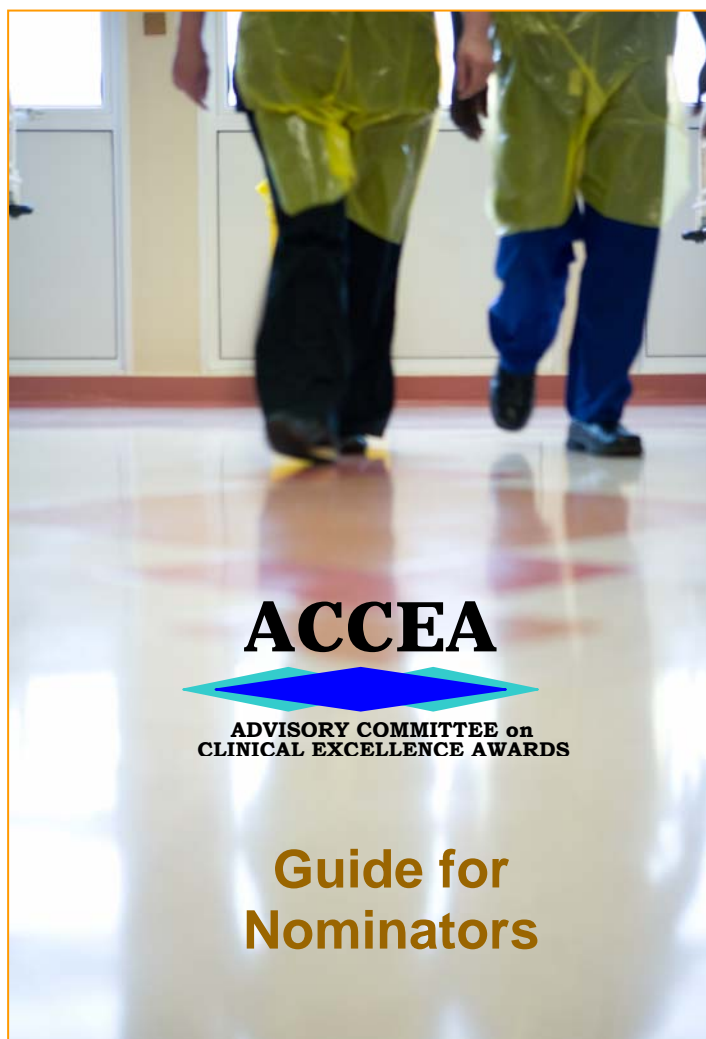


NHS Consultants' Clinical Excellence Awards Scheme

2010 Awards Round



This Guide is available online at the ACCEA website
www.dh.gov.uk/ab/ACCEA/index.htm

The online national awards application system is available at
www.nhsaccea.dh.gov.uk

Published September 2009

Please note: All applications for national awards must be submitted by 17:00 on 11 December 2009

Preface: What does this Guide cover?

This Guide is for any individual or professional body, including Royal Colleges, universities and other national and local bodies, who are supporting applications for awards.

It explains how the Scheme works, your role in the process and how awards are assessed. Please use it as background information, and as a reference guide when nominating consultants for an award.

You can find a set of frequently asked question about the Scheme, along with annual reports of previous awards rounds, at www.dh.gov.uk/ab/ACCEA/Publications/index.htm

You can also find a Code of Practice at www.dh.gov.uk/ab/ACCEA/Committees/index.htm

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Part 1: Introduction

The Clinical Excellence Awards Scheme

1.1 Clinical Excellence Awards recognise and reward NHS consultants and academic GPs who perform 'over and above' the standard expected of their role. Awards are given for quality and excellence, acknowledging exceptional personal contributions.

1.2 To be considered for an award, consultants and academic GPs will have to demonstrate a commitment to delivering high quality patient care, and to the continuous improvement of the NHS.

1.3 The Scheme is administered by the Advisory Committee on Clinical Excellence Awards (ACCEA). It is managed on the Committee's behalf by a full time Secretariat in the Department of Health.

1.4 The Clinical Excellence Awards Scheme continues to take account of the good practice developed by the Distinction Awards and Discretionary Points schemes that preceded it.

How does the Scheme work?

1.5 There are 12 levels of award. In England Levels 1-8 are awarded locally (Employer Based Awards) and Levels 10-12 (Silver, Gold and Platinum hereafter) are awarded nationally in England and Wales. Level 9 Awards in England can be awarded locally as Employer Based Awards or nationally. To avoid confusion, this Guide will always refer to the National Level 9 Award as Bronze. In Wales, Local Awards have been replaced by Commitment Awards and Bronze Awards are awarded nationally for excellence at National level. The principles in this Guide apply equally to both National and Local Awards.

1.6 Applicants in England may apply for both a National Bronze and an Employer Based Level 9 in the same year. If an applicant finds out, they have been successful at the Employer Based level, before the national recommendations are made, they must let the Secretariat know, to avoid duplication. There is no difference to the applicant, financially or otherwise, between the two awards.

1.7 ACCEA and its regional sub-committees recommend individuals for Bronze, Silver, Gold and Platinum awards. Applicants for Levels 1-9 are recommended by Employer Based Awards Committees.

1.8 ACCEA monitors the Employer Based Scheme and publishes an annual report on the awards that includes information on their distribution.

1.9 There is a core application form for all the awards, which means everyone who applies has the same opportunity to highlight their contributions.

1.10 For National Awards in England, applications must be completed online. Anyone applying for an Employer Based Award will need to download and complete the form, and then submit it through their employer's process. For applications in Wales, please see Section 3.5 of the Guide for Applicants.

What does the Scheme reward?

1.11 The Scheme rewards individuals who perform over and above the standard expected of a consultant or academic GP in their post, and who locally, nationally or internationally demonstrate many of the following characteristics (**applicants are not expected to demonstrate them all**)

- > Demonstrate sustained commitment to patient care and wellbeing, or improving public health
- > Sustain high standards of both technical and clinical aspects of service whilst providing patient focused care
- > Make an outstanding contribution to professional leadership
- > In their day to day practice demonstrate a sustained commitment to the values and goals of the NHS, by participating actively in annual job planning, observing the Private Practice Code of Conduct and showing a commitment to achieving agreed service objectives
- > Through active participation in clinical governance contribute to continuous improvement in service organisation and delivery
- > Embrace the principles of evidence based practice
- > Contribute to knowledge base through research and participate actively in research governance
- > Are recognised as excellent teachers and/or trainers and/or managers
- > Contribute to policy making and planning in health and health care

1.12 ACCEA invites consultants to provide evidence that their performance is over and above the standard in five domains enabling them to demonstrate that they:

- > Deliver patient services which are safe, have measurably effective clinical outcomes and provide a good experience for patients
- > Have significantly improved quality of care and the clinical effectiveness of their local service or related clinical service broadly within the NHS
- > Have made an outstanding leadership contribution, including within the profession

> Have made innovations and contributed to the research and the evidence/evaluative base for quality

> Have delivered high quality teaching and training including the introduction of innovative ideas

1.13 The Scheme aims to be completely open, and offer every applicant an equal opportunity. Individual applications are considered on merit and the process is competitive. Awards are also monitored to ensure that the Scheme is implemented fairly. The Annual Report of ACCEA records the conclusions of this monitoring.

How are applications assessed?

1.14 Standard guidelines are used when recommending applicants for every level, and all awards are assessed against the same strict criteria. These criteria are set out in Part 3 of this guide, and there is also guidance for assessors on how to judge applications against these criteria, which you can view at www.dh.gov.uk/ab/ACCEA/Awardsround/index.htm The criteria apply to all levels of award, but take account of achievements possible at different stages of a consultant or academic GP's career.

1.15 The sub-committees and Employer Based Awards Committees measure achievement within the parameters of an individual's employment, and recognise excellent service over and above the normal delivery of job plans including the quality of delivery of contractual duties.

1.16 ACCEA receives additional advice from specialist societies and national nominating bodies on the quality of applicants' work. This guide has been produced to assist nominators in providing citations either at national or local level. The rankings provided by nominators are one of the pieces of evidence used by sub-committees to help evaluate applications. The lists are also considered by the Chair and Medical Director, when preparing the recommendations to go to the main Committee.

About the ACCEA and supporting committees

1.17 The Advisory Committee on Clinical Excellence Awards (ACCEA) is a non-departmental public body. It issues guides to the Scheme (such as this document) setting out the detailed criteria against which applicants will be assessed. The ACCEA Secretariat administers the application and assessment process for national awards.

1.18 The Committee advises Ministers on award nominations proposed by the Chair and Medical Director, and based on recommendations from sub-committees and national bodies.

Regional sub-committees

1.19 There are thirteen regional ACCEA sub-committees. They are based on the boundaries of the Strategic Health Authorities for the different regions. London is split into three, while the North West is subdivided into two to make these areas manageable. There is also a committee covering Wales and a DH Committee considering those who are seconded to the Department of Health or who work for Arms Length Bodies.

1.20 The sub-committees consider all applications from consultants and academic GPs in their area. They produce a shortlist for the Chair and Medical Director to consider for submission to the main Committee.

Committee members come from a wide range of backgrounds, with experience and expertise in numerous areas. They will come to a collective decision on who to shortlist for awards.

National nominating bodies

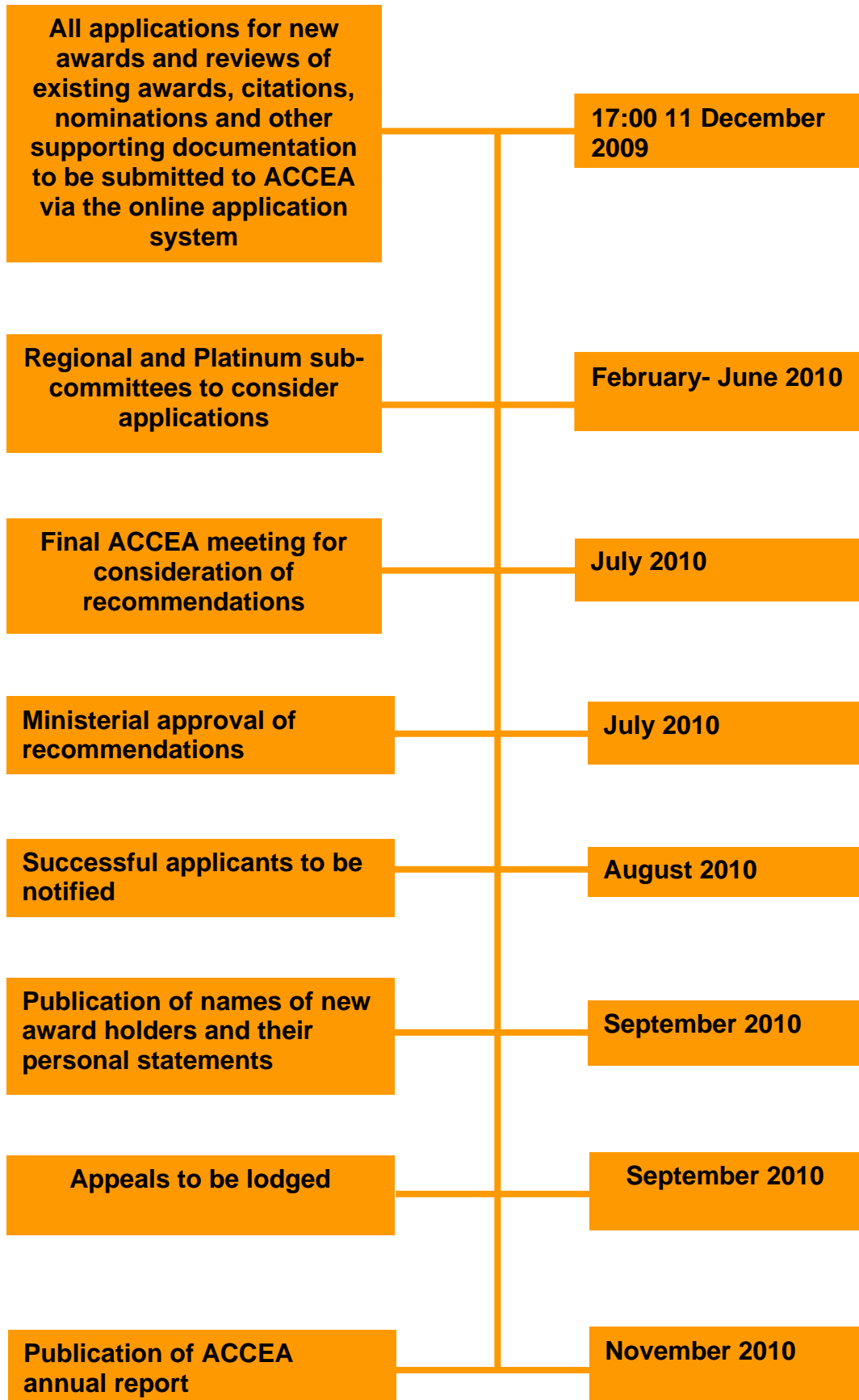
1.21 The Chair and Medical Director also consider the applications of all those consultants and academic GPs who have been nominated by accredited national bodies, such as the Medical Royal Colleges, Universities UK, the British Medical Association, the Medical Women's Federation and the British International Doctors Association. A full list of national nominating bodies is published on the ACCEA website. Those bodies are invited to submit a ranked shortlist in a similar way to that produced by the sub-committees. These lists are then considered, in consultation with the relevant sub-committee, for submission to the main Committee.

Employer Based Awards Committees

1.22 Every year, each NHS organisation employing consultants eligible for an award, appoints an Employer Based Awards Committee to consider applications for levels 1-9. Smaller organisations have the option of linking with a neighbour if they do not have enough people to form a viable committee. A separate Guide to Employer Based Awards is available on the ACCEA website.

National Awards timetable

1.23 The timetable for the National Awards round is set out in the following diagram. All applications and supporting documents for national awards must be submitted by 17:00 on 11 December 2009. **It will not be possible to submit an application after this time under any circumstances.**



Part 2: Making a citation or nomination

2.1 Any individual or professional body (including Royal Colleges, universities, specialist societies and other national nominating bodies*) may support applications for awards, by making a citation on behalf of a consultant or academic GP. This should indicate their views on the quality of the applicant's contribution. Accredited bodies should also submit ranked lists assessing the relative excellence of a limited number of their members' applications – this number is determined by the size of their constituency. These lists are given the term 'Nominations'.

*a list of national nominating bodies is published on the ACCEA website.

2.2 Support from a third party should be provided by way of a citation. For a national award, this should be submitted via the online process.

2.3 You should concentrate your evaluation on contributions to the specialty or appropriate grouping, rather than assessing contributions to the local employer, for which ACCEA receives direct, informed advice.

2.4 Part 3 of this guide outlines the criteria that will be used for assessing the application, and you should refer to these when considering possible applicants. You may also wish to use the advice on scoring that ACCEA provides for its sub-committees in the Guide to Assessors, available on the ACCEA website at www.dh.gov.uk/ab/ACCEA/Awardsround/index.htm

2.5 You should nominate separately at Bronze, Silver and Gold levels. ACCEA does not invite Platinum nominations from specialist societies.

2.6 Applicants who hold Discretionary Points or a Level 1-8 Award may apply for a higher level award. The guidelines for applying for a higher award are as follows:

| Applicant holds: | Applicant can apply for: |
|--|---|
| Discretionary Points or Level 1-8 Award or Commitment Awards in Wales or exceptionally no award | Bronze Award through the national process and/or Level 9 from their employer |
| Bronze Award or Level 9 Award or B Distinction Award | Silver Award |
| Silver Award | Gold Award |
| Gold Award or A Distinction Award | Platinum Award |

2.7 Citations and nominations will only be considered if a consultant has submitted a completed application.

2.8 The deadline for submitting a citation and a nomination is **17:00 on 11 December 2009**.

2.9 All valid nominations for National Awards, in ranked order, received by ACCEA by the closing date will be considered by the appropriate regional sub-committee.

Citations

2.10 A completed citation must identify:

- > The person completing the citation, as well as the body, if any, that they represent
- > A senior officer of the society who vouches for the institution's approval of that citation, if relevant

Citations that fail to meet these conditions will not be accepted as the citation of a body but would be considered as a personal citation.

“Nominations” or ranked lists

2.11 Those bodies that submit a list of names to ACCEA should rank them. Rankings for national awards must be submitted online via the ACCEA website. A ranked list can only be submitted to ACCEA if there is a corresponding citation for each applicant.

How to submit a ranked list via the online system:

Step 1: You will need to request a user id and password if it is your first time accessing the online system. Otherwise please use your previous login details. To access the online system go to www.nhsaccea.dh.gov.uk



Step 2: Once logged in, you may create one ranked list for each national award level.



Step 3: Within each ranked list, you can add consultants to it by their Surname/GMC number. You may change or amend the rankings at any point up until final submission. You can save a draft version of the ranked list and return to complete it later.



Step 4: You must provide a citation for each applicant on a ranked list. A ranked list will only be considered complete once every applicant on it has a citation submitted by the Nominating Body. You must be logged into the system to submit the citation.



Step 5: You will only be able to submit your list once all the applicants on it have registered an application in the system and a citation has been submitted by the nominating body. Once you have submitted your list it can no longer be amended.

Arrangements for applicants employed by the NHS in Wales

2.12 An official nominating body who wishes to nominate an applicant employed by an NHS organisation in Wales must download a Word version of the citation form, from www.wales.nhs.uk/ACCEA and email it to the Welsh ACCEA Secretariat at ian.owen@wales.gsi.gov.uk.

A ranked list must also accompany any citation, showing the applicant's position. ACCEA will send the Welsh ranking template by email to all official nominating bodies for this purpose.

All Welsh citations/ranked lists must be submitted by the closing date, which is 17:00 on Friday 11 December 2009.

Governance

2.13 All nominating bodies must operate open, objective and transparent systems for consideration of applicants and notify ACCEA of their process.

Specialist societies

2.14 A specialist society is defined, for the purposes of ACCEA, as:

“A professional body, which draws together consultants in a defined specialty, for the purpose of improving their contribution to the practice of that specialty, and to its research and educational activities.”

Eligible societies should have at least 100 UK based consultant members on their membership roll and have elected offices. International societies are eligible to apply provided they meet these criteria.

Societies must be open to membership nationally; regionally based organisations cannot be considered. Registered charities are eligible to apply, however they must confirm that their activities fall within the ACCEA definition and are not mainly confined to fundraising.

2.15 Specialist societies who wish to make nominations for Clinical Excellence Awards must apply for registration as recognised nominating organisations. The register is open for new applications for a designated period each year. Please check the ACCEA website or contact Maggie.bishop@dh.gsi.gov.uk for more details. Application forms are available from the ACCEA Secretariat. Once successfully registered, societies may submit nominations to ACCEA. When seeking your accreditation, you need to provide ACCEA with:

> **An outline of your aims, structure and membership**

> Details of how you sifted and ranked applicants for awards

> The structure and size of your assessment panel in particular you must confirm that a lay member has been appointed, and the lay member must be unconnected to the organisation

> The name and contact details of your president, chair or secretary

2.16 We recognise that small societies may have difficulty satisfying ACCEA that processes meet these standards. In such cases, ranked nominations will not be accepted, but such societies may still provide citations

2.17 ACCEA carried out a comprehensive re-registration exercise in 2007 and if you have been accepted as a specialist society, you do not have to seek registration again unless:

> There are changes in the way you administer the process of submitting a ranked list

> The senior officer of your society, who vouches for the list, has changed

If either of these applies, you should inform ACCEA of the change.

2.18 ACCEA requires that you appoint a panel of five to ten members, to evaluate applicants – depending on the size of your society. The panel should include consultants with and without a national award, and one or more lay representative. This should be someone who has informed lay involvement in healthcare, and up to date knowledge of the NHS. This individual must be unconnected to the organisation.

2.19 The number of nominations you make will depend on how large a society you are:

> For societies with up to 250 consultant members, no more than six Bronze, three Silver and two Gold nominations

> For societies between 250 and 500 consultant members, a maximum of ten Bronze, four Silver and three Gold nominations

> For societies with more than 500 consultant members, it depends on the award level:

○ Bronze: Up to 1.3% of the consultant members with no national award, or 12 – whichever is the larger

○ Silver: Up to 8% of the consultant member B/Bronze award holders or 5 – whichever is the larger

○ Gold: Up to 8% of the consultant members with Silver awards or 4 – whichever is the larger

2.20 The process used should be publicised to all members in sufficient time to allow applicants to prepare applications, and should provide for self nomination. You should

confirm that your members are aware of processes for determining its ranked nomination list. This is now mandatory.

Nominations from national nominating bodies

2.21 ACCEA has designated a small number of organisations which represent nationally a particular interest as “national nominating bodies” (NNBs). It invites these organisations to support candidates through ranking and citations. Applications ranked by NNBs progress through the assessment process to the main ACCEA committee and cannot be sifted out at an earlier stage.

NNBs differ from specialist societies in that the latter provide a perspective from interests within individual specialties. Candidates nominated by specialist societies do not automatically progress to the main ACCEA committee as they may be screened out by the regional sub-committee processes.

2.22 You should submit nominations in ranked order to the following formulae:

- > For Bronze Awards, the number of nominations will not exceed 1.3 % of consultants with no national award
- > For Silver Awards, the number of nominations will not exceed 8% of the consultant member B/Bronze award holders
- > For Gold Awards, the number of nominations will not exceed 8% of the consultant members holding Silver awards

Nominations from universities and research bodies

2.23 You should make nominations directly to ACCEA for Bronze, Silver and Gold Awards. The deadlines and process you use should be publicised to all potential applicants early enough to allow applicants to prepare applications, and should provide for self-nomination. You should confirm that your members are aware of processes for determining your ranked nomination list. You must do this by the closing date of Friday 11 December 2009 at 17:00. Please do so by email to: maggie.bishop@dh.gsi.gov.uk. This is now mandatory.

2.24 Nominations for Platinum Awards from universities should follow the process outlined in paragraph 2.27 and 2.28 before being submitted via the ACCEA member from Universities UK.

2.25 For ACCEA to accept and process your nominations, you must provide:

- > The composition of your committee, which should include consultants with and without a national award, and one or more lay representative. This should be someone from outside

your organisation who has informed lay involvement in healthcare, and up to date knowledge of the NHS

- > Details of how the committee sifted and ranked applicants for an award, paying particular attention to evidence submitted on Domain 4 (research and innovation) and Domain 5 (teaching and training)
- > The name and contact details of your vice-chancellor

2.26 You should submit nominations in a ranked order, according to the formulae set out in Section 2.21.

Nominations for Platinum awards

2.27 A specified number of nominations in a ranked list should be submitted through the online system by:

- > The Academy of Medical Royal Colleges (AoMRC), on behalf of the Royal Colleges
- > Universities UK on behalf of the universities and research bodies
- > Regional sub-committees of ACCEA

2.28 Nominations for Platinum Awards from Royal Colleges and Faculties should be submitted to the AoMRC. Nominations for Platinum Awards for Universities and Research Bodies should be submitted through Universities UK.

2.29 Nominating bodies, must submit a list of nominations for Platinum Awards online by 17:00 on 11 December 2009. Rank them in order of those you think most worthy of an award.

2.30 The ranking from each nominating body will be considered by the ACCEA Platinum sub-committee members when evaluating applications for recommendation to the central committee.

When submitting a ranked list, completed citations must also be submitted by the closing date for all applicants on that list.

Part 3: Assessment criteria

Highlighting achievements in five key areas

3.1 When completing their application, consultants and academic GPs need to highlight their achievement in five domains.

You should consider how consultants and academic GPs have performed in these areas before deciding on whether to nominate them.

3.2 Consultants are not expected to perform 'over and above' expectations in all five domains to be worthy of an award. Much will depend on the type and nature of their post.

Assessing applications

3.3 As part of the assessment process, domains are scored by committee members using the following ratings:

| | |
|---|----|
| > Excellent | 10 |
| > Over and above contractual commitment | 6 |
| > Meets contractual commitment | 2 |
| > Has made no assessable commitment | 0 |

More detailed information can be found in the Guide to Assessors, available on the ACCEA website www.dh.gov.uk.ab/ACCEA/Awardsround/index.htm

These are the criteria against which applications will be assessed:

Domain 1 – delivering a high quality service

3.4 Applicants need to give evidence of their achievements in delivering a service which is safe, has measurably effective clinical outcomes, provides good patient experience and where opportunities for quality improvement are consistently sought and implemented.

For this, they will need to demonstrate:

- > Excellence in delivering professional commitments
- > Exemplary standards in dealing with patients, relatives and all grades of medical and other staff
- > Evidence of the effect on patient experience
- > Good use of NHS resources

Domain 2 – developing a high quality service

3.5 Evidence of how they have significantly enhanced clinical effectiveness (the quality, safety and cost effectiveness) of their local service(s) or related clinical service widely within the NHS.

They need to indicate developments they have been responsible for, either alone or in a team. This could cover any of the following:

- > Developing and completing relevant audit cycles, or applying strategies to implement evidence based practice leading to demonstrable service improvements
- > Developing and/or applying tools to determine barriers to clinical effectiveness and their resolution
- > Developing diagnostic tools, intervention techniques and methodology
- > Analysis and management of risk; this may include examples of specific improvements, reduced risk or enhanced safety
- > Improved service delivery, with a demonstrable effect
- > Evidence that changes have been informed by consultation with patients
- > Innovation in service delivery, with a demonstrable effect – such as evidence of improved outcomes or the introduction of major prevention, diagnosis, treatment innovations or care models
- > Improved cost effectiveness due to service redesign, with no diminution in quality
- > Development of new health or healthcare plans or policies
- > Major reviews, inquiries or investigations
- > National policies to modernise health services or professional practice

Domain 3 – leadership and managing a high quality service

3.6 Evidence of how applicants have made a substantial personal contribution to leading and managing a local service, or national/international health policy development.

ACCEA recognises many different aspects of leadership, which could include, but are not limited to the following:

- > Evidence of outcomes as a result of effective leadership inputs and processes, giving evidence of specific achievements

- > Information about any change management programme or service innovation that the applicant has led, with evidence that it has improved service effectiveness or efficiency, for the benefit of patients, public and staff
- > Development of individuals or a team in support of improved patient care
- > An ambassadorial or change champion role, perhaps in public consultation or explanation of complex issues
- > Developing a compelling and shared vision and purpose for change, investing in verified improvement methodologies, tackling any behavioral issues that get in the way
- > Demonstrating their contribution to removing barriers and positively promoting diversity in the workplace, enabling career progression of clinicians and non clinicians in to senior leadership positions
- > Working across professional boundaries in support of improved patient care, access or use of resources (clinically effective and efficient)
- > A leadership contribution to developing patient focused services
- > Membership of a committee along with evidence of outcomes and the applicant's role in these
- > Evidence in team leadership for which they take sole, rotational or shared responsibility
- > A leadership role in relation to clinical governance, including a leadership role in policy or service development

ACCEA is aware that membership of some national or international boards or advisory bodies is itself recognised as a marker of high professional status, but this will not usually be accepted as evidence of an awardable contribution: we require evidence of what the applicant's membership has achieved.

Domain 4 – research and innovation

3.7 Here applicants may focus on contributions to research or the evidence/evaluative base for quality or service innovation, including the translation of evidence in to practice.

They should detail what they have achieved to date and what they hope to achieve, with supporting evidence, such as:

- > New techniques or service models that they have developed and which have been adopted by others. In particular how they have applied improvement methodologies in order to get the right things to the right place, at the right time, in the right quantities while minimising waste and being flexible and open to change

- > Actual or potential impact of the research on health service practice, health service policy or the development of health services
- > Major trials/evaluations (including systematic reviews) led, co-investigated, and published over the preceding five years and referenced
- > Their contribution as a research leader and to the research and supervision of others
- > Other markers of standing in their chosen research field(s), such as membership of review boards of national funding agencies, office bearer of learned societies or professorships
- > Grants they hold, not just those held by the Department
- > Peer-reviewed publications, chapters or books written/edited
- > Significant participation in multi-centre research studies, e.g. high levels of recruitment to clinical trials

Domain 5 – teaching and training

3.8 For some applicants, teaching and training will form a major part of the contribution they make to the NHS.

Applicants should give evidence of excellence that relates to:

- > Quality of teaching. Any medical undergraduate teaching, evidence of student feedback and other forms of teacher quality assessment that show students' views.
- > Leadership and innovation in teaching. This might include:
 - Developing a new course
 - Innovative assessment methods
 - Introducing new learning facilities
 - Authorship of successful textbooks or other teaching media
 - A contribution to postgraduate education and life-long learning
 - Contributions to teaching in other UK centres or abroad
- > Scholarship, evaluation and research contributing to national or international leadership in the educational domain. This might include:
 - Presentations
 - Invitations to lecture
 - Peer-reviewed and other publications on educational matters
 - A contribution to education of other health and social care professions

- > Institutional success in regulatory body and quality assessment audits of teaching in which they have played a key role. This could include undergraduate or postgraduate examinations, or supervision of postgraduate degree students
- > Evidence of personal commitment to developing teaching skills. Such as Higher Education Academy membership, courses completed etc
- > Evidence of unusual teaching and educational commitment and workload not recognised in other ways

They will not be expected to include examples in all of these categories.

Additional information for Domains 3, 4 and 5

3.9 For Domains 3-5, applicants have an opportunity to include additional material to support their application, if they have been particularly active in a specific area.

3.10 Applicants applying for Levels 1-9, Bronze or Silver can include additional information for Domain 3 **or** Domain 4 **or** Domain 5.

3.11 Gold applicants can select **two** from Domains 3, 4 and 5. If they have been particularly active in these areas, applicants should choose the one/s in which they have made the most significant contribution.

3.12 For Platinum applications, applicants have the opportunity to select all **three** Domains in which to include extra information.